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MaineCare Member Handbook

Welcome to MaineCare

<u>Table of Contents</u> (with hyperlinks to topics)

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Welcome to MaineCare

This MaineCare Member Handbook explains the basics of the MaineCare Program. To find something fast, look at the table of contents.

This Handbook is not a legal policy or contract. The information in this Handbook can change. For the latest information, call MaineCare Member Services at 1-800-977-6740, option 3. If you are deaf or hard of hearing and have a TTY machine, call 1-800-977-6741. These numbers are at the bottom of each page.

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Chapter 1: Basic Information About MaineCare

MaineCare is a health insurance program run by the Department of Health and Human Services.

Covered Services and Benefit Packages

Covered services are the medically necessary services you can get with your MaineCare benefit package. Your benefit package may not cover all of the services you need and some services are not covered in any MaineCare benefit package.

Some examples of covered services

- visits to your doctor
- x-rays
- medications
- physical or occupational therapy
- inpatient and outpatient hospital visits

Some examples of services that are not covered in any benefit package

- experimental procedures or drugs
- cosmetic surgery
- homeopathic treatment
- health club memberships like the YMCA

A benefit package is a group of covered services

The benefit package you get depends on your income, age, medical needs, and whether you need help with ADLs (activities of daily living). You can read more about benefit packages in Chapter 5.

How to find out what benefit package you get

Call MaineCare Member Services.

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Your benefit package can change

It can change when there is a change in your income, household size, age, or medical condition.

There are two different ways to get the services in your benefit package

You can get MaineCare services through:

- Managed care
- Fee for service

There are different rules for each.

About managed care

Usually, children, their parents, pregnant women, and adults who do not have dependent children living with them must enroll in managed care. Most elderly people and people with disabilities do not have to enroll in managed care.

With managed care, you must choose a PCP (primary care provider). This **provider** can be a doctor, physician's assistant, nurse practitioner or health care clinic. Your PCP will manage most of your medical care and will refer you for specialty care if you need it. There is more information about managed care in Chapter 3.

About fee for service

If you are not in managed care, you can get MaineCare services from any provider who accepts MaineCare. Sometimes you can get services without a referral from a PCP. However, most specialists will not see you without a referral. So, MaineCare recommends that you have a PCP to make sure you get the best medical care.

Who to Talk to When You Have Questions About MaineCare

There are three places to call for help.

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DHHS (Department of Health and Human Services) eligibility specialist

An eligibility specialist at your local DHHS office can help if you:

- Do not get a MaineCare card
- Have questions about financial eligibility
- Move
- Become pregnant
- Have a baby
- Lose your MaineCare card or someone steals your card
- Have family members or other people move in or out of your home
- Get or lose other health insurance
- Get or lose a job
- Have questions about your monthly premiums
- Are denied or you case is closed for MaineCare and you want to ask for an Administrative Hearing

<u>Chapter 6</u> has a list of addresses and phone numbers for local DHHS offices.

MaineCare Member Services

MaineCare Member Services can help if you:

- Have questions about your benefits
- Have questions about your co-payments
- Have questions about managed care
- Have questions about prior authorization
- Get a bill from a provider
- Need help finding a provider enrolled in MaineCare
- Need help finding a transportation provider
- Need this Handbook in another language, large print, Braille, on tape, or another format
- Want to ask for an Administrative Hearing if your services have been reduced or denied

MaineCare Member Services office hours are Monday and Wednesday from 8 am to 6 pm and Tuesday, Thursday and Friday from 8 am to 5 pm. <u>Back to Table of Contents</u>

Chapter 2: How MaineCare Members Get Services

The MaineCare Card

All MaineCare members get a permanent, plastic MaineCare card. Your name and identification number is on the front of the card. On the back, there is a magnetic strip that your provider can swipe to find out about your eligibility and the services you can get.

Each MaineCare member has a MaineCare card

When you qualify for MaineCare, DHHS sends you a MaineCare card. Only you can use your card. It is against the law to let anyone else use it.

What to do if you don't get a card in the mail or your card is lost or stolen

Call or stop in to see your eligibility specialist at your local DHHS office. See Chapter 6 for your local DHHS office address and telephone number.

Always carry your MaineCare card with you

If you do not have it with you, providers may choose not to see you.

Keep your MaineCare card even if you lose your eligibility

You may qualify for MaineCare again. If that happens, you'll be able to use the card.

MaineCare Providers

Before you get care, make sure the provider takes MaineCare. If you see a provider who does not take MaineCare, you will have to pay the bill unless that provider enrolls as a MaineCare provider.

Important things to know about MaineCare providers

- Not all providers in Maine are MaineCare providers.
- Not all MaineCare providers are managed care providers.
- Some MaineCare providers limit the number of MaineCare members they see. <u>Back to Table of Contents</u>

- New Hampshire providers who are within 15 miles of the border of Maine and New Hampshire can enroll in MaineCare and follow the same rules as though they are in Maine.
- Canadian providers who are within 5 miles of the border of Maine and Canada can enroll in MaineCare and follow the same rules as though they are in Maine.
- Canadian pharmacies **cannot** be MaineCare providers.

How to find a MaineCare provider

Call MaineCare Member Services.

Prior Authorization (PA)

Before you can get some services or equipment, MaineCare must give its OK. This OK is called **PA** or **prior authorization**. Your provider asks for PA by sending in a form to MaineCare.

Your provider must send in the PA form **before** you get the service or medical equipment. MaineCare will send you and your provider a letter to let you know if you have PA for a service or medical equipment. If you get the service or the medical equipment without MaineCare approval, you may have to pay the bill.

For questions about PA, call MaineCare Member Services.

Examples of services and medical equipment that need PA

- Some medications
- Some mental health services
- Some surgeries
- Medical supplies and medical equipment that costs over \$499.99
- Hearing aid services
- Most out-of-state services
- Some eye care services
- Some dental services, especially for adults
- All orthodontia services (braces)
- Some physical therapy, occupational therapy, and speech therapy for adults
- Long-term in-patient treatment at an in-state psychiatric hospital. Long-term means more than 120 days
- Out of state transportation and some in-state transportation services

• Some home care services

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Some ambulance services.

Some medications need PA

MaineCare has a "Preferred Drug List" that lists drugs that need PA and those that don't. For those that need PA, MaineCare must give its OK. When your provider prescribes a medication, ask if it needs PA.

Your provider asks for PA by sending in a form to MaineCare **before** prescribing the medication. After getting the form, MaineCare has 24 hours to let you, the pharmacy and your doctor know if the medication is authorized.

We didn't put the Preferred Drug List in this Handbook because it's long and the list changes. You can find the list online at http://www.maine.gov/dhhs/bms/. Or call MaineCare Member Services.

What to do if the pharmacist tells you your prescription can't be filled

Ask the pharmacist why MaineCare won't pay. If the pharmacist doesn't know, call the Pharmacy Help Desk. This number is toll free 1-866-796-2463. Sometimes, the pharmacy can give you a short-term supply of your prescription. This will give your provider time to send in the PA form, for MaineCare to give PA for the medication, or for your provider to prescribe a different medication.

If MaineCare denies your PA, you can ask for a hearing. Please see page X for how you can ask for a hearing.

If MaineCare denies a drug that MaineCare has been paying for, and you ask for a hearing within 10 days of the denial, you should be able to get your prescription filled.

Call the Pharmacy Help Desk toll free at 1-866-796-2463 if you have questions about PA or your medications. If you are deaf or hard of hearing and have a TTY machine, call 1-800-423-4331. You can also call MaineCare Member Services.

Getting Emergency and Non-Emergency Services In and Out of State

Emergency services

You should get care right away when you think you have an emergency. An Emergency Medical Condition is a physical or mental health problem that you think could cause serious harm if not treated quickly.

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If you are outside the state of Maine and have an emergency medical condition, get care as quickly as possible. Call Member Services if you get a bill for this care.

In an emergency, it is okay if the provider gives you care first and then gets in touch with MaineCare to find out about becoming a MaineCare provider. If the out of state provider chooses not to become a MaineCare provider, then you may have to pay the bill. You cannot get your money back from MaineCare.

Non-emergency services

If you need a service that is not an emergency, you must get it:

- In Maine from a MaineCare provider
- In New Hampshire from a MaineCare provider who is within 15 miles of the Maine border
- In Canada from a MaineCare provider who is within 5 miles of the Maine border

If you need a MaineCare covered service that no one offers in Maine, and your provider thinks you should get the service in another state, MaineCare may OK it. Your provider must ask MaineCare to PA (prior authorize) any services you get in another state **before** you get the service.

Paying for Care: Co-payments, Premiums, Cost of Care and Other Payments

Co-payments

MaineCare pays all of the cost for many services. For some services, you may need to pay for part of the cost. What you pay is called a **co-payment** or **co-pay** for short.

Some members never pay a co-pay. They are:

- Members under 21 years of age
- Members 21 years of age or older, who are:
- * Native American
- * On a ventilator

- * In a hospital
- * Pregnant
- * In a nursing home

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- * Under State guardianship
- * In a medical institution, intermediate care facility for the mentally retarded (ICF-MR), or a private non-medical institution (PNMI) where DHHS sets the cost of care

Co-pay amounts for covered services

You can get information about co-pays from MaineCare Member Services.

You are responsible for paying your co-pay when you get a service

For most MaineCare members, if you don't pay your co-pay at the time you get the service, the provider must still give you care. For example, a pharmacy must give you your medicine even if you don't pay your co-pay. People with HIV/AIDS who get physician or pharmacy services under the Special Benefit Package must pay their co-pay or not get services.

If you don't pay, the provider may take you to small claims court or send your bill to a collection agency.

Premiums

A premium is the amount of money some members pay each month for MaineCare coverage. Very few members pay a premium. You'll know if you have to pay a premium because your MaineCare eligibility "notice of decision" will tell you.

- If you must pay a premium, you'll get a coupon from MaineCare in the mail each month you owe a premium.
- You must return the coupon with your payment when it is due.
- If you don't pay the premium, you may lose MaineCare coverage.
- If you have any questions about your premium, contact your eligibility specialist at your local DHHS office. See <u>Chapter 6</u> for your local DHHS office address and telephone number. <u>Back</u> to Table of Contents

Cost of care

If you live in a nursing home, residential care facility including assisted living, cost-reimbursed boarding home, or an Adult Family Care Home, you *must_*use most of your income to pay for your care or you may not be allowed to stay. What you pay is called your "cost of care." Whether or not you pay a cost of care depends on your income. If you have to pay a cost of care, DHHS will send you a letter telling you the amount of your monthly payment.

Also, members who get any of the following benefit packages *may* have to pay a cost of care:

- Benefit Package #4: Home and Community-Based Benefits for People with Mental Retardation or Autistic Disorder
- Benefits Package #5: Home and Community-Based Benefits for the Physically Disabled
- Benefit Package #6: Home and Community-Based Benefits for the Elderly and Adults with Disabilities

Chapter 5 has a list of all the benefit packages and what services are covered in each one. If you don't know which benefit package you get, call MaineCare Member Services.

Other payments

You may have to make other payments. For example, you generally must pay when you:

- Get a service not covered by MaineCare; and your provider told you before you got the service that it wouldn't be covered; and you agreed to pay
- Choose to get services from someone who is not a MaineCare provider
- Did not follow the rules of your other health insurance and your other health insurance denies your claim

Using A Mail Order Pharmacy

You can order brand name or generic drugs from mail order pharmacies approved by MaineCare

Call the Pharmacy Help Desk to get information about the approved mail order pharmacies or to find out if the drug you need is a brand name or generic drug.

The Help Desk number is toll free at 1-866-796-2463. If you are deaf or hard of hearing and have a TTY machine, call 1-800-423-4331. Back to Table of Contents

Mail order saves you time and money

- You can **save time** by getting a 90-day supply of most brand name drugs.
- You can **save money** because when you order a 90-day supply of a **brand name drug** you pay one co-pay. If you order the same drug once each month for 3 months, you would pay three co-pays.
- When you order **generic drugs** through the mail, you pay the same co-pay as you pay in your local pharmacy.
- Mail order saves you **time** because the drugs will be delivered to your mailbox. Back to Table of Contents

Chapter 3: For MaineCare Managed Care Members

Fast Facts About Managed Care

- In managed care, you must have one PCP (Primary Care Provider) that you see most of the time for your health care
- Your PCP can be a doctor, physician's assistant, nurse practitioner, or a health care clinic
- You must choose your PCP or MaineCare will choose one for you. It is better for you if you make this choice.
- Your PCP "manages" your care. He or she knows you best and can refer you for special care if you need it. You can also get some services from other providers without a referral from your PCP. There is more information about this later in this chapter.

How to Enroll in MaineCare Managed Care

First, you must choose a PCP

MaineCare members who must enroll in MaineCare managed care must choose a PCP. You will get an "enrollment packet" from MaineCare Member Services to do this. This packet contains a Provider Choice Form, a provider directory for your area and other important information.

- Read the information in the packet and choose a PCP from the provider directory. You can choose a different provider for each MaineCare member in your family. If you don't choose your own PCP, MaineCare will choose one for you.
- Follow the instructions in the packet and send back the Provider Choice Form or call MaineCare Member Services with your choice.
- After MaineCare gets your information, they'll send you a letter with your PCP's name, telephone number, and the date you can start seeing him or her. Call MaineCare Member Services if you think the information in the letter is wrong.

Second, make an appointment with your PCP right away

Don't wait until you're sick. To get the best care, you should know your PCP and your PCP should know you. You must see your PCP at least once before he or she can refer you to a specialist.

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Some MaineCare Members Can't Enroll In Managed Care

You can't enroll in managed care if you:

- Live in a nursing or ICF-MR (Intermediate Care Facility for people with Mental Retardation)
- Have Medicare
- Have other health insurance
- Will be eligible for MaineCare for less than 3 months
- Are in the MaineCare Member Restriction Plan

Some MaineCare Members Can Ask Not To Enroll in Managed Care

You can call MaineCare Member Services and ask not to be enrolled in MaineCare managed care if you:

- Have a chronic disease or disability for which you have been seeing a MaineCare provider who is not part of MaineCare managed care.
- Have a terminal illness and have a provider who is not part of MaineCare managed care
- Have a language or cultural need that your MaineCare PCP cannot meet
- Have to travel more than 30 minutes to see your PCP
- Are a migrant farm worker or his or her dependent
- Are homeless
- Are in foster care
- Have Supplemental Security Income (SSI) and are under the age of 19
- Are getting hospice care at the time of enrollment
- Are living in jail or a prison
- Are living in a private non-medical institution like a residential care facility
- Are a patient in a hospital on the date you should enroll. You have to enroll in MaineCare managed care when you leave the hospital Back to Table of Contents

More Information About PCPs (Primary Care Providers)

How to change PCPs

To change your PCP, call MaineCare Member Services. **Do not** call your DHHS eligibility specialist to make this change.

- If you have been a MaineCare managed care member for less than 90 days, you don't need to give a reason for choosing a different PCP.
- If you have been a MaineCare managed care member for 90 days or more, you must have a good reason to change your PCP. Some good reasons to change are:
- MaineCare chose a PCP for you who is not the provider you usually see
- You are moving and need to find a PCP closer to your new home
- You are not happy with the care you get.

After you call, it will take some time to make the change in the system. After the change is made, you'll get a confirmation letter from MaineCare Member Services.

Your PCP can choose not to have you as a patient

If your PCP does not want to see you as a patient, he or she will send a letter to you and to MaineCare. Some reasons why your provider may not want to see you as a patient are:

- You don't show up for your appointments and you don't call ahead to let them know
- You don't bring your card to your appointments
- You don't get a referral when you need one
- You don't follow the office rules

Getting Managed Care Services

Important note: Some of these services listed below are not available for members with Benefit Package 3 – Childless Adults. Read the section on this benefit package or call MaineCare member services for information.

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Services you can get from your PCP or with a referral from your PCP

Your PCP will either provide these services or refer you to another provider. Any provider you see must take MaineCare.

- Checkups
- Regular sick care
- Hospital care (inpatient and outpatient)
- Outpatient surgery at a clinic or center
- Medical supplies and equipment such as wheelchairs, hospital beds, and oxygen
- Developmental and behavioral evaluation clinic services
- Speech and hearing services
- Home health services
- Care from a specialist like a cardiologist or an ear, nose, and throat doctor
- Physical, occupational, and speech therapy
- Eye care (you do not have to call your primary care provider to get an eye exam)
- Chiropractic services

Services you can get without a referral from your PCP

These are some of the services you can get on your own, without first seeing your PCP or getting a referral. Some services may need a Prior Authorization. If you have questions, ask your PCP or call MaineCare Member Services.

- Mental health services
- Substance abuse services
- Pregnancy care
- Lab and x-ray services
- Yearly pelvic exam, pap smear, and mammogram
- Family planning services
- Dental services (age 21 and over limited to emergency services only)

- Routine eye exam (under age 21 can have a routine eye exam once a year and members 21 and older can have a routine eye exam every two years)
- Eye glasses (restrictions for members age 21 or over)
- Emergency care
- Ambulance services for emergencies <u>Back to Table of Contents</u>
- Rides to an appointment for MaineCare covered services
- Early intervention services (social work and developmental therapy) for children ages birth to age five

Getting services from a specialist

You need a referral from your PCP to see **most** specialists. Before you see a specialist:

- Get a referral from your PCP. If you are already seeing a specialist when you enroll in MaineCare managed care, you still must get a referral from your PCP.
- Make sure you know the date and time of your appointment with the specialist.
- Make sure the specialist is a MaineCare provider.
- Make sure to take a copy of the referral form with you to the appointment if your PCP gives you a copy.

Using the hospital emergency room

Use the emergency room only for an emergency, not for routine care. An emergency is any physical or mental health problem that you think could cause serious harm if not treated quickly. These are examples of emergencies: (See also Getting Emergency and Non-emergency Care In and Out of State.)

Chest pain	Trouble breathing	Rape or other attack
Broken bones	Poisoning	Sudden or severe pain
Severe bleeding	Changes in vision	Coughing blood
Bad burns	Mental confusion	Thoughts of harming
		yourself or
		others

When you think you have an emergency, you can go to the hospital emergency room without asking your primary care provider first. If you are

not sure if it is an emergency, call your PCP first. You can call 7 days a week, 24 hours a day.

If you go to the emergency room and it's not an emergency, you may have to wait a long time before being seen. <u>Back to Table of Contents</u>

Urgent care

When you don't think it is an emergency, but you need care or advice quickly, it's called "urgent care." For urgent care, call your PCP. You can call 7 days a week, 24 hours a day. Your PCP will arrange for you to get care from someone else if he or she is not there.

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Chapter 4: Other Important Things to Know

Administrative Hearings

If you disagree with a MaineCare decision about a denial or reduction of your services, you have a right to a hearing in most situations

When MaineCare makes a decision about your services, MaineCare will send you a letter explaining the decision. It will also tell you how you can ask for a hearing if you disagree with MaineCare's decision. If you want a hearing and you ask for it within 10 days of getting the letter, your services will continue. You can take up to 60 days to ask for a hearing, but services will not continue in the meantime.

To request a hearing, call 1-800-977-6740 or, if deaf or hard of hearing and have a TTY machine, call 1-800-977-6741. Or write to MaineCare Member Services, P.O. Box 709, Augusta, ME 04332.

At the hearing, there will be a hearing officer who is not from MaineCare and has no other involvement with your case. Staff from MaineCare will explain how and why they made the decision they did, and you'll get a chance to say why you think their decision is wrong. The hearing officer will listen to both sides and will recommend a decision about what should be done. After the hearing, the Commissioner's office will send you and MaineCare a letter explaining the final decision.

You can bring anyone to the hearing you want, including a lawyer. MaineCare staff may also bring a lawyer.

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Advance Health Care Directive (Living Will)

An Advance Health Care Directive is sometimes called a Living Will. It is something you write before you're too sick to tell people what kind of care you want at the end of your life. It's important for your family and caregivers to know what you would like for yourself. A Directive can also be used to plan the mental health care you would like to get if you're ever unable to make decisions.

You may write your own Advance Health Care Directive or you can get a form at any Maine hospital. You can find a copy of an Advance Health Care Directive on the website at

http://www.maine.gov/dhhs/beas/resource/rit2chew.htm. The Disability Rights Center has a manual and forms for an Advanced Directive for Planning Mental Health Care on their website,

http://www.drcme.org/publications.asp?pubid=16. Legal Services for the Elderly also has Advance Health Care Directive forms. The phone numbers for the Disability Rights Center and Legal Services for the Elderly can be found in Chapter 6 of this Handbook. Back to Table of Contents

Appointments - Making Them And Keeping Them

Call ahead for an appointment

Most providers will not see patients who come in without an appointment. If you need help with transportation to a MaineCare covered service, call the transportation agency that is closest to you. You need to call them as soon as possible. See <u>list of Transportation Agencies</u>.

Keep your appointments and be on time

Call your provider if you are going to be late or can't keep an appointment. MaineCare does not pay providers for missed appointments. Many providers will not see you again if you miss an appointment.

Take your MaineCare card to all of your appointments

If you do not have your card with you, providers may choose not to see you.

Confidentiality: All of the Information You Give Us Is Confidential

MaineCare will only share information to pay your provider, to help you get the services you need, or as required by law.

Eligibility: MaineCare Will Review It Each Year

Every MaineCare member gets a yearly financial review and some members get a yearly medical review.

When you get your financial review form from DHHS, make sure to return it on time. If you don't, you could lose coverage. Back to Table of Contents

Between reviews

Tell your DHHS eligibility specialist about changes that may affect your MaineCare eligibility. These include a change in any of the following.

- Address
- Income
- Assets

- Availability of other health insurance
- Living arrangements
- Marital status
- Number of dependents
- See <u>Chapter 6</u> for your local DHHS office address and telephone number.

Emergency Room Services

Use the emergency room only for an emergency, not for routine care. An emergency is any physical or mental health problem that you think could cause serious harm if not treated quickly. These are examples of emergencies:

Bad burns

Broken bones

Changes in vision

Chest pain

Coughing blood

Mental confusion

Poisoning

Rape or other attack

Sudden or severe pain

Severe bleeding

Thoughts of harming yourself or others

Trouble breathing

When you think you have an emergency, you can go to the hospital emergency room without asking your provider first. If you are not sure if it is an emergency, call your provider first.

If you go to the emergency room and it is not an emergency, you may have to wait a long time to be seen.

Estate Recovery

MaineCare may make a claim on the estate of a member who has died. This is done to recover the cost of services when:

- MaineCare provided benefits for a member after the member turned 55;
- The member didn't tell MaineCare about property or assets that would have made the member ineligible for MaineCare; or

The member was entitled to get benefits under a long-term care insurance policy.
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Important things you should know about Estate Recovery

- DHHS won't take or put a lien against your home or property while you are living.
- DHHS won't put a lien on your property if you have MaineCare and/or while you are living
- If MaineCare has a claim against an estate, we will not collect from the estate as long as:
- The spouse of the deceased is still living
- The deceased has a child under 21
- The deceased has a child who is blind
- The deceased has a child who is permanently and totally disabled
- Before MaineCare begins collecting from an estate, the heirs may ask to make voluntary payments to MaineCare. These payments must be approved by the Department.
- If MaineCare is only paying your Medicare costs, then there will be no claim against your estate.

Hardship Waiver and Claim Reduction

Heirs may ask that an estate or a part of it be protected from Estate Recovery if it will create an "undue hardship." This is called a "hardship waiver." Under certain other conditions, heirs may ask MaineCare to not make a claim or to reduce some, or all of the claim. This is called a "claim reduction."

Heirs must request a hardship waiver or claim reduction within six (6) months from the member's death or within thirty (30) days from the notice of the Department's claim, whichever is later.

To find out more, call Estate Recovery at 1-800-572-3839. If you are deaf or hard of hearing and have a TTY machine, call 1-800-423-4331. Or, you may contact Legal Services for the Elderly at 1-800-750-5353. If you are deaf or hard of hearing and have a TTY machine, call 1-800-750-5353.

Full-Cost Purchase Option for Children Under 19

If you have children under age 19 and they lose MaineCare coverage because your family income goes up, you can buy MaineCare coverage for them for up to 18 months or until the child's 19th birthday, whichever comes first. Back to Table of Contents

If you want more information about this, call MaineCare Member Services. Ask about the "Full Cost Purchase Option for Children Under 19 Years of Age."

Interpreter Services

If you are a MaineCare member who does not speak English, has limited-English speaking ability, or are deaf or hard of hearing, you have a right to have an interpreter when you see your provider for covered services. The provider must let you know you have this right and cannot charge you for this service. If you want a MaineCare paid interpreter at your appointment, you must ask your provider in advance to have one there.

If you prefer, you can have a family member or a friend over age 18 interpret for you. You must give this person permission to go with you to an appointment. MaineCare cannot pay this person. If you want a family member or friend to interpret, you must check with your provider first.

Call MaineCare Member Services if you are having a problem.

Medical Records

Under Maine law, your provider must give you your medical records or a detailed summary of your records. You must ask for your records by writing a letter or by signing a release. There is no charge unless the provider charges all his or her patients for transferring or copying records. If the provider believes that giving you your records could be harmful to your health, he or she can ask that you choose someone else to get your records. The provider cannot charge you to send your medical records to another provider.

Medicare

Some MaineCare members are also covered by Medicare. Medicare is not the same as MaineCare. Medicare is a Federal program that provides health benefits to individuals who:

- Are age 65 and older; or
- Have received Social Security disability benefits for 24 months in a row; or
- Have end stage renal disease for a certain period of time.

Medicare has four parts

- Part A (Hospital Insurance) pays for in-patient hospital care, some skilled nursing facility care, hospice care, and some home health care. Back to Table of Contents
- Part B (Medical Insurance) pays for doctors, outpatient hospital care, and some other medical services that Part A does not cover, like physical and occupational therapists. It does not pay for most prescription drugs.
- Part C (Medicare Managed Care) is called Medicare Advantage. These are health plan options that include Part A and Part B covered services and in addition, may include prescription drug coverage, preventive care and other services.
- Part D (Prescription Drug Coverage) covers outpatient prescription drugs through private companies offering plans that meet Medicare's criteria. For more information on Part D, call DHHS Pharmacy Help Desk toll free at 1-866-796-2463. If you are deaf or hard of hearing and have a TTY machine, call 207-622-3210.

If you have MaineCare and Medicare, Medicare should always pay first. There are several ways that MaineCare and Medicare work together.

- MaineCare members enrolled in both MaineCare and Medicare are called "dual eligibles." For most people in this group, MaineCare pays their Part B premiums and their Medicare co-insurance and deductibles for Medicare covered services. They get a MaineCare card for MaineCare services that are not covered by Medicare.
- For some people with low income, MaineCare pays the Part B premium only.
- MaineCare members who are eligible must enroll in a Medicare Part D Prescription Drug Plan to get MaineCare drug coverage.

For more information about Medicare, call 1-800-MEDICARE (1-800-633-4227).

Newborns

As soon as possible after your baby is born let your DHHS eligibility specialist know so that your baby can be added to MaineCare and the hospital bill can be paid. Your baby can get MaineCare until his or her first birthday even if your income changes. Make sure to apply for a Social Security number for your baby. If your baby is still eligible after one year, you will need to show your eligibility specialist your baby's birth certificate. Back to Table of Contents

Other Health Insurance or Medical Support and MaineCare

What to do if you have other health insurance and MaineCare

When you see your provider, always show all your insurance cards and your MaineCare card. Examples of other insurance are:

- Private insurance like Anthem, Aetna, Cigna
- Medicare
- TriCare

If your other health insurance changes or you lose it, call your eligibility specialist at DHHS. See <u>Chapter 6</u> for your local DHHS office address and telephone number.

Your other insurance is billed before MaineCare

If you have other insurance that covers what MaineCare covers, then the other insurance always pays first. If your other health insurance doesn't pay your claims because you didn't follow their rules, MaineCare may not pay for a covered service.

When you apply for MaineCare, you are asked to "assign your rights" to other insurance. This means you give MaineCare the right to get money back for services it paid that another insurance or source should have paid for.

Examples of payments from other insurance or sources:

- Private insurance payment
- Court ordered medical support from a non-custodial parent
- Workers' Compensation
- Accident settlements

Your other insurance does not have to pay MaineCare back when MaineCare pays only for your Medicare premium, co-insurance and deductible. <u>Back to Table of Contents</u>

The other parent provides health care coverage for your child who lives with you

If your child lives with you and the non-custodial parent can get insurance for the child through work, MaineCare will ask him or her to enroll the child for health coverage. MaineCare can help the other parent apply for the insurance.

We may need your help to get in touch with the non-custodial parent. If you don't help, your child can still enroll in MaineCare but you won't be able to get coverage for yourself. You don't have to help DHHS find the other parent if you think reporting this information would be a threat to you or your family. Let your eligibility specialist know if this is a problem for you.

If the other parent already has private coverage for the child, he or she shouldn't drop it even if the child enrolls in MaineCare. MaineCare could hold the non-custodial parent responsible for the medical costs.

Private Health Insurance Premium (PHIP)

Preventive Services for Members of All Ages

MaineCare pays for preventive services. These are services that keep you well and find health problems before they become serious. Examples of preventive services are:

- Healthy visits (well child exams)
- Lead screenings
- Immunizations (shots) for children and adults
- Pap smears for women
- Mammograms
- Prostate screenings for men
- Annual physical exams for adults

Preventive services for members under age 21

MaineCare will send a letter and postcard when it is time for a child or teen to get a well child exam. This exam is called "Healthy Visit." Return the card if you need help to schedule appointments, find transportation, find a MaineCare provider, or get Optional Treatment Services. Optional Treatment Services are services that are not usually covered by MaineCare, like a helmet for a child who has seizures. Back to Table of Contents

Restriction Policy

If you abuse the MaineCare rules by getting services that you do not need, including prescription drugs, MaineCare will limit you to specific providers, including pharmacies, medical providers and hospitals.

Social Security Number

When you apply for MaineCare, we ask for your Social Security number

MaineCare uses your Social Security number to make sure we do not mix you up with someone else and to match the information you give us with Maine Employment Security Commission, Social Security Administration, the Railroad Retirement Board and the Internal Revenue Service. We keep this information private.

Transitional MaineCare

If your income goes up because of earnings or an increase in child support, and you are no longer eligible for "regular" MaineCare, you may be able to get Transitional MaineCare for up to 6 months. Call your eligibility specialist for information.

Transportation

MaineCare contracts with agencies to provide transportation to covered services

The transportation agency in your region will decide if you qualify for transportation services and what type of transportation you can get. The transportation agency will choose the least expensive way to get you to your appointment. Examples are: a ride with a volunteer driver or agency van,

train, bus, or ferry. You must use whatever type of transportation the agency provides unless there's a health reason not to. The agency can also pay for mileage if you use your own car, or use someone else's car.

The transportation agency is allowed to call your provider to make sure you have an appointment. Back to Table of Contents

How to get transportation to an appointment

- Call the <u>regional transportation agency</u> in your area as soon as you make your appointment for a covered service.
- Call ahead don't wait until the day of your appointment to set up transportation. Most transportation agencies will not be able to set up a ride for you if you wait until the day of your appointment to call.
- If you make an emergency medical trip when the transportation agency is closed and you want MaineCare to pay you for it, you must call the transportation provider within 24 hours or the next business day.
- Call your transportation agency right away if your appointment is canceled or changed. Ask about their "no show" policy. You may not be able to get rides if you don't show up when you said you would.
- If you've been approved to get MaineCare services out of state, let your transportation agency know right away. The agency needs to get prior authorization before taking you out of state and the paperwork takes time.
- Do not bring family or friends with you to your medical appointment unless you need help. If someone is going with you, let the transportation agency know when you schedule your ride. MaineCare will only pay for another person to go with you if you need medical help on your way to the appointment.
- If you use your own, or someone else's vehicle, MaineCare will pay mileage for the most direct route from the home of the person with the medical appointment to the provider. If you share a ride with a friend or family member who also has an appointment, only one of you can get paid for the mileage.

See Chapter 6 for list of transportation agency addresses and phone numbers.

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Chapter 5: Benefit Packages

MaineCare Benefit Packages:

The list below shows you who is eligible for each MaineCare benefit package. MaineCare has several different benefit packages that include different covered services. If you're not sure which benefit package you get, call MaineCare member services. You should know that:

- The benefit package you get depends on your income, age, and medical needs.
- You can qualify for only one benefit package at a time. <u>Back to</u> Table of Contents

	Benefit Packages	Who is Eligible
1	Children and Young Adults	Newborn through age 20, including members with the Katie Beckett waiver.
2	<u>Adults</u>	Pregnant women, the elderly, and the disabled; people age 21 and over who have dependent children living in the home
3	Adults, Childless Adults	For adults who are between age 21 and 64 who have no dependent children living in the home, have not been determined to be disabled and do not meet qualifications for another MaineCare benefit package.
4	Home and Community- Based Benefits for People with Mental Retardation and Autistic Disorder	Adults 18 and over who have mental retardation or autism
5	Home and Community- Based Benefits for the Physically Disabled	Adults 18 and over who have physical disabilities and have the capacity to direct their own services
6	Home and Community- Based Benefits for the Elderly and Adults with Disabilities	The elderly and adults 18 and over who have physical disabilities

	Benefit Packages	Who is Eligible
7	Special	People who are living with HIV/AIDS, pregnant women who are presumptively eligible, and inmates in jails.
8	<u>Undocumented</u> <u>Residents</u>	Undocumented Residents
9	Residents of Nursing Home	Residents of Nursing Home
10	Residents of Residential Care Facilities	Residents of Residential Care Facilities

This chapter gives you information on the covered services for each benefit package. Before you get care, make sure the service you need is in your MaineCare benefit package. You can get more information about the services in the MaineCare Benefits Manual on the web at http://www.maine.gov/sos/cec/rules/10/ch101.htm or you can call MaineCare Member Services.

There are limits or special rules for most covered services

- MaineCare covers only services that are medically necessary.
- There may be limits on how many times you can use a service.
- If you are in MaineCare managed care, you may need to see your primary care provider to get certain services. You may also need a referral from your primary care provider before seeing a specialist. Read Chapter 3 on Managed Care.
- Your provider may need to get PA (prior authorization) from MaineCare before you can get certain services.
- You may need a prescription for certain services.
- You may need to pay a co-pay for certain services.
- For certain services, you may need an assessment of your ability to take care of yourself and perform household tasks.
- Covered services may change.
- You can find out the specific limits or special rules for each covered service in the MaineCare Benefits Manual at http://www.maine.gov/sos/cec/rules/10/ch101.htm or you can call

MaineCare Member Services. of Contents

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Benefit Package 1 - Children and Young Adults

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at www.maine.gov/sos/cec/rules/10/ch101.htm or you can call MaineCare Member Services.

This benefit package is for children through young adult, birth through age 20. Some of the covered services in the list below are limited to certain age groups. For example, some services are for children birth through age 5 only and some are for those between ages 18 and 20. This benefit package includes members who have the Katie Beckett waiver.

Covered services are found in the following section of the MaineCare Benefits Manual:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Assisted Living Services (Section 6)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17)
- Consumer Directed Attendant Services (Section 12)
- Day Habilitation Services for Children with Mental Retardation (Section 24)
- Day Treatment Services (Section 41)
- Dental Services (Section 25)
- Developmental and Behavioral Clinic Services (Section 23)
- Early Intervention Services (Section 27)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Hearing Aids and Services (Section 35) Back to Table of Contents

- Home Based Mental Health Services (Section 37)
- Home Health Services (Section 40)
- Hospice Services (Section 43)
- Hospital Services (Section 45)
- Intermediate Care Facility for Mentally Retarded Individuals (Section 50)
- Laboratory Services (Section 55)
- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65)
- Nursing Facility Services (Section 67)
- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Prevention, Health Promotion, and Optional Treatment Services (Section 94)
- Private Duty Nursing and Personal Care Services (Section 96)
- Private Non-Medical Institution Services (Section 97)
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)
- Rural Health Clinic Services (Section 103)
- School Based Rehabilitative Services (Section 104)
- Speech and Hearing Services (Section 109)
- Substance Abuse Treatment Services (Section 111)
- Targeted Case Management Services (Section 13)
- Transportation Services (Section 113)
- V.D. Screening Clinic Services (Section 150)
- Vision Services (Section 75)

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Benefit Package 2 - Adults

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at

<u>www.maine.gov/sos/cec/rules/10/ch101.htm</u> or you can call MaineCare Member Services.

This benefit package is for adults who are age 21 and over who have dependent children living in the home, pregnant women, the elderly and people with disabilities.

Covered services are found in the following sections of the MaineCare benefits manual

- Adult Family Care Services (Section 2)
- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Assisted Living Services (Section 6)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17)
- Consumer Directed Attendant Services (Section 12)
- Day Health Services (Section 26)
- Dental Services (Section 25)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Home Health Services (Section 40)
- Hospice Services (Section 43)
- Hospital Services (Section 45)
- Intermediate Care Facility for Mentally Retarded Individuals (Section 50)
- Laboratory Services (Section 55)

- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Medical Imaging Services (Section 101) <u>Back to Table of Contents</u>
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65)
- Nursing Facility Services (Section 67)
- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Private Duty Nursing and Personal Care Services (Section 96)
- Private Non-Medical Institution Services (Section 97)
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)
- Rural Health Clinic Services (Section 103)
- Speech and Hearing Services (Section 109)
- Substance Abuse Treatment Services (Section 111)
- Targeted Case Management Services (Section 13)
- Transportation Services (Section 113)
- V. D. Screening Clinic Services (Section 150)
- Vision Services (Section 75) <u>Back to Table of Contents</u>

Benefit Package 3 – Adults, Childless Adults

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at

<u>www.maine.gov/sos/cec/rules/10/ch101.htm</u> or you can call MaineCare Member Services.

This benefit package is for adults who are between age 21 and 64 who have no dependent children living in the home, have not been determined to be

disabled and do not meet qualifications for another MaineCare benefit package.

Covered services are in the following sections of the MaineCare Benefits Manual:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Chiropractic Services (Section 15)
- Dental Services (Section 25)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Outpatient Mental Health Services <u>Back to Table of Contents</u>

Each calendar year, MaineCare will pay for a total of 24 visits for outpatient mental health services with a licensed practitioner, not counting Methadone services billed by hospitals, emergency, crisis, and medication management services (Sections 46, 65, and 100, face to face visits only with licensed practitioner). Outpatient mental health services include group or individual therapy. Licensed practitioners include a mental health agency, or an independent therapist, or psychologist. You must keep track of the number of visits you get. If you get more than 24 visits, you will have to pay for them. Visits to get these outpatient service(s) will count towards the 24-visit limit:

- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Mental Health Services (Section 65). The 24-visit limit does not apply to emergency and crisis services as specified in sub-section 65.05-3, A, C, D or F
- Psychiatric Facility Services (Sections 46)
- Psychological Services (Section 100)
- Pharmacy Services (Section 80)
- Physician Services (Section 90)

- Podiatric Services (Section 95)
- Private Non-Medical Institution Services (Section 97)
- MaineCare will pay for private non-medical institution services only when provided in a substance abuse treatment facility as defined in sub-section 97.01-5, A.
- Rural Health Clinic Services (Section 103)
- Substance Abuse Treatment Services, outpatient (Section 111)
- Transportation Services (Section 113)
- Vision Services (Section 75)
- Only when provided by ophthalmologists and optometrists.
 MaineCare will not pay for services provided by opticians. Glasses are not covered.
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Benefit Package 4-Home and Community Benefits for Members with Mental Retardation or Autistic Disorder

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at

<u>www.maine.gov/sos/cec/rules/10/ch101.htm</u> or you can call MaineCare Member Services.

This benefit package is for members 18 and over who have mental retardation or autism and who do not live in an institution. (1) There are a limited number of slots available, so before a person can get care under this benefit package, a funded slot must be available. (2) Also, the member must have an Individual Plan of Care approved by the Department of Health and Human Services (DHHS) or its contracted agent.

Covered Services

This benefit package includes the Section 21 and Section 29, Home and Community Benefits for Members with Mental Retardation and Autistic Disorders, services listed below:

- Adaptive Aids
- Consultation Services
- Communication Aids
- Crisis Intervention Services
- Environmental Modification Services
- Residential and Day Habilitation Services
- Maintenance Therapy
- Non-traditional communication consultation and evaluation
- Personal Support Services
- Respite Care Services
- Supported Employment Services
- Transportation Services

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In addition, this benefit package also includes the following covered services:

Advanced Practice Registered Nursing Services (Section 14)

- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Assisted Living Services (Section 6)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17)
- Day Health Services (if not living in a PNMI)(Section 26)
- Dental Services (Section 25)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Home Health Services (Section 40) except for personal care provided by a home health aid
- Hospice Services (Section 43)
- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65)
- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Private Duty Nursing and Personal Care Services (Section 96) nursing only no personal care
- Private Non-Medical Institution Services (Section 97)
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)
- Rural Health Clinic Services (Section 103)
- Speech and Hearing Services (Section 109) <u>Back to Table of</u> Contents

- Substance Abuse Treatment Services (Section 111)
- Targeted Case Management Services (Section 13)
- Transportation Services (Section 113)
- V. D. Screening Clinic Services (Section 150)
- Vision Services (Section 75) <u>Back to Table of Contents</u>

Benefit Package 5 – Home and Community Benefits for the Physically Disabled

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at www.maine.gov/sos/cec/rules/10/ch101.htm or you can call MaineCare Member Services.

This benefit package is for adults 18 and over who have physical disabilities and the capacity to direct their own services. Before a MaineCare member can get this benefit package, the Department of Health and Human Services (DHHS) or its contracted agent must approve an Individual Plan of Care. Some of the services may be limited.

Covered Services

This benefit package includes the Section 22, Home and Community Benefits for the Physically Disabled, services listed below:

- Case Management Services
- Consumer Directed Attendant Services
- Consumer Instruction
- Personal Emergency Response Systems
- Environmental Modification

In addition, this benefit package also includes the covered services in the following sections of the MaineCare Benefits Manual:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17)
- Day Habilitation Services for Persons with Mental Retardation (Section 24)
- Day Health Services (Section 26)
- Dental Services (Section 25) Back to Table of Contents

- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Hearing Aids and Services (Section 35)
- Home Health Services (Section 40)
- Hospice Services (Section 43)
- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65)
- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Private Duty Nursing and Personal Care Services (Section 96)
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)
- Rural Health Clinic Services (Section 103)
- Speech and Hearing Services (Section 109)
- Substance Abuse Treatment Services (Section 111)
- Targeted Case Management Services (Section 13)
- Transportation Services (Section 113)
- V. D. Screening Clinic Services (Section 150)
- Vision Services (Section 75) Back to Table of Contents

Benefit Package 6 – Home and Community Benefits for the Elderly and for Adults with Disabilities

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at

<u>www.maine.gov/sos/cec/rules/10/ch101.htm</u> or you can call MaineCare Member Services.

This benefit package is for the elderly and adults 18 and over who have physical disabilities and do not live in an institution. Before a MaineCare member can get this benefit package, the Department of Health and Human Services (DHHS) or its contracted agent must approve an Individual Plan of Care.

Covered Services

This benefit package includes the Section 19, Home and Community Benefits for the Elderly and for Adults with Disabilities services listed below:

- Comprehensive Case Management
- Environmental Modifications
- Homemaker Services
- Independent Living Assessments
- Personal Care Assistant Services
- Personal Emergency Response Services
- Respite Services
- Home Health Services
- Day Health

In addition, this benefit package also includes the covered services in the following sections of the MaineCare Benefits Manual:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17) <u>Back to Table of</u> Contents

- Day Habilitation Services for Persons with Mental Retardation (Section 24)
- Dental Services (Section 25)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Hearing Aids and Services (Section 35)
- Hospice Services (Section 43)
- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65)
- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)
- Rural Health Clinic Services (Section 103)
- Speech and Hearing Services (Section 109)
- Substance Abuse Treatment Services (Section 111)
- Targeted Case Management Services (Section 13)
- Transportation Services (Section 113)
- V. D. Screening Clinic Services (Section 150)
- Vision Services (Section 75) Back to Table of Contents

Benefit Package 7 - Special

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at www.maine.gov/sos/cec/rules/10/ch101.htm or you can call MaineCare Member Services.

This benefit package is for:

- Certain members living with HIV/AIDS
- Pregnant women who are presumptively eligible
- Jail or prison inmates

Certain members living with HIV/AIDS

Covered services are in the following sections of the MaineCare Benefits Manual:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Early Intervention Services (Section 27)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Medical Imaging Services (Section 101)
- Behavioral Health Services (Section 65)
- Pharmacy Services (Section 80)
- Physician Services (Section 90)
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rural Health Clinic Services (Section 103)
- Substance Abuse Treatment Services (Section 111)
- Transportation Services (Section 113) Back to Table of Contents

- V. D. Screening Clinic Services (Section 150)
- empty
- Eligibility for this Benefit Package is determined by the Houlton DHHS office. See <u>Directory of DHHS offices</u>. <u>Back to Table of</u> Contents

Pregnant Women Who Are Presumptively Eligible

This benefit package makes sure that a woman gets prenatal care in the first 60 days of her pregnancy. To get care for the rest of the pregnancy, the woman must apply for MaineCare at her local DHHS office before the 60 days are up.

Covered services include:

- Physician Services
- Rural Health Clinic Services
- Independent Lab and X-ray Services
- Other Pregnancy-Related Services
- Prescription Drugs
- Outpatient Hospital Services

Jail or Prison Inmates

This benefit package is for inmates of the state prison, Maine Youth Center, and local or county jails.

Covered services

Covered services are limited to inpatient services in the following facilities:

- Hospital
- Intermediate Care Facility for People with Mental Retardation
- Nursing Facility
- Juvenile psychiatric facility

Benefit Package 8: Undocumented Residents

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at

www.maine.gov/sos/cec/rules/10/ch101.htm or you can call MaineCare Member Services.

This benefit package is for undocumented residents. Undocumented residents:

- Are not citizens and have no documents from Homeland Security;
 and
- Certain other non-citizens.

Covered services

The only covered service is emergency services, including labor and delivery.

Benefit Package 9: Residents of Nursing Homes

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at

<u>www.maine.gov/sos/cec/rules/10/ch101.htm</u> or you can call MaineCare Member Services.

This benefit package is for members living in a nursing home.

Covered services

This benefit package includes Section 67, Nursing Facility Services. These include the cost of the room, food, routine supplies and equipment provided by the nursing home, and nursing care.

In addition, this benefit package also includes the covered services in the following sections of the MaineCare Benefits Manual if the nursing home is not responsible for providing them:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17)
- Dental Services (Section 25)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Hearing Aids and Services (Section 35)
- Home Health Services (Section 40)
- Hospice Services (Section 43)
- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65) Back to Table of Contents

- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)-restricted coverage based on rules
- Rural Health Clinic Services (Section 103)
- Speech and Hearing Services (Section 109)
- Substance Abuse Treatment Services (Section 111)
- Transportation Services (Section 113)
- Vision Services (Section 75) <u>Back to Table of Contents</u>

Benefit Package 10: Residents of Residential Care Facilities

For all benefit packages, make sure MaineCare covers the service you need before you get care. There are limits or special rules about how to get most covered services in each benefit package. For more information, see the MaineCare Benefits Manual on the web at www.maine.gov/sos/cec/rules/10/ch101.htm or you can call MaineCare Member Services.

This benefit package is for people living in residential care facilities that provide assisted living services. Examples of residential care facilities are apartments, small adult family care homes, or larger facilities.

Covered services

Covered services are in the following sections of the MaineCare Benefits Manual:

- Advanced Practice Registered Nursing Services (Section 14)
- Ambulance Services (Section 5)
- Ambulatory Care Clinic Services (Section 3)
- Ambulatory Surgical Center Services (Section 4)
- Assisted Living Services (Section 6)
- Chiropractic Services (Section 15)
- Community Support Services (Section 17)
- Day Habilitation Services for Persons with Mental Retardation (Section 24)
- Day Treatment Services (Section 41)
- Dental Services (Section 25)
- Developmental and Behavioral Clinic Services (Section 23)
- Early Intervention Services (Section 27)
- Family Planning Agency Services (Section 30)
- Federally Qualified Health Center Services (Section 31)
- Genetic Testing and Clinical Genetic Services (Section 62)
- Hearing Aids and Services (Section 35)
- Home Health Services (Section 40) except personal care
- Hospice Services (Section 43) Back to Table of Contents

- Hospital Services (Section 45)
- Laboratory Services (Section 55)
- Licensed Clinical Social Worker, Licensed Clinical Professional Counselor and Licensed Marriage and Family Therapist Services (Section 58)
- Medical Imaging Services (Section 101)
- Medical Supplies and Durable Medical Equipment (Section 60)
- Mental Health Services (Section 65)
- Occupational Therapy Services (Section 68)
- Pharmacy Services (Section 80)
- Physical Therapy Services (Section 85)
- Physician Services (Section 90)
- Podiatric Services (Section 95)
- Prevention, Health Promotion, and Optional Treatment Services (Section 94)
- Private Duty Nursing and Personal Care Services (Section 96) except personal care services
- Psychiatric Facility Services (Section 46)
- Psychological Services (Section 100)
- Rehabilitative Services (Section 102)
- Rural Health Clinic Services (Section 103)
- School Based Rehabilitative Services (Section 104)
- Speech and Hearing Services (Section 109)
- Substance Abuse Treatment Services (Section 111)
- Targeted Case Management Services (Section 13)
- Transportation Services (Section 113)
- V.D. Screening Clinic Services (Section 150)
- Vision Services (Section 75) Back to Table of Contents

Chapter 6: Helpful Addresses and Telephone Numbers

Maine Department of Health and Human Services Offices

Augusta	Bangor
35 Anthony Avenue	396 Griffin Road
Augusta, ME 04333	Bangor, ME 04401
624-8090 or 1-800-452-1926	561-4100 or 1-800-432-7825
TDD/TTY 1-800-606-0215	TDD/TTY 1-800-606-0215
Biddeford	Calais
208 Graham Street	392 South Street
Biddeford, ME 04005	Calais, ME 04619
286-2400 or 1-800-322-1919	454-9000 or 1-800-622-1400
TDD/TTY 1-800-606-0215	TDD/TTY 1-800-606-0215
Caribou	Ellsworth
Skyway Plaza	17 Eastward Lane
30 Skyway Drive, Unit 100	Ellsworth, ME 04605
Caribou, ME 04736	667-1600 or 1-800-432-7823
493-4000 or 1-800-432-7366	TDD/TTY 1-800-606-0215
TDD/TTY 1-800-606-0215	
Farmington	Fort Kent
114 Corn Shop Lane	92 Market Square
Farmington, ME 04938	Fort Kent, ME 04743
778-8400 or 1-800-442-6382	834-7700 or 1-800-432-7340
TDD/TTY 1-800-606-0215	TDD/TTY 1-800-606-0215
Houlton	Lewiston
11 High Street	200 Main Street
Houlton, ME 04730	Lewiston, ME 04240
532-5000 or 1-800-432-7338	795-4300 or 1-800-482-7517
TDD/TTY 1-800-606-0215	TDD/TTY 1-800-606-0215
Machias	Portland
13 Prescott Drive	161 Marginal Way
Machias, ME 04654	Portland, ME 04101
255-2000 or 1-800-432-7846	822-2000 or 1-800-482-7520
TDD/TTY 1-800-606-0215	TDD/TTY 1-888-720-1925

Rockland	Sanford
91 Camden Street, Suite 103	890 Main Street, Suite 208
Rockland, ME 04841	Sanford, ME 04073
596-4200 or 1-800-432-7802	490-5400 or 1-800-482-0790
TDD/TTY 1-800-606-0215	TDD/TTY 1-800-606-0215
Skowhegan	South Paris
98 North Avenue	243 Main Street Suite #6
Skowhegan, ME 04976	South Paris, ME 04281-9901
474-4800 or 1-800-452-4602	744-1200 or 1-888-593-9775
TDD/TTY 1-800-606-0215	TDD/TYY 1-800-606-0215

Transportation Agencies

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Aroostook County

Regional Transportation System P.O. Box 552, 24 Houlton Rd. Presque Isle, ME 04769 Mileage Reimbursement 764-5246 or 1-800-621-1011 Local Bus Service 764-3384 or 1-800-442-3320

Augusta area

KV CAP 219 Cony Road Augusta, ME 04330 622-4761

Auburn area

Western Maine Transportation 76 Merrow Rd. Auburn, ME 04210 784-9335 or 1-800-393-9335

Community Concepts Transportation 79 Main St. Auburn, ME 04210 795-6073

Bath area

Coastal Transportation Services 46 Summer St. Rockland, ME 04841 596-6605 or 1-800-289-6605

Biddeford area

York County CAP P.O. Box 72, 6 Spruce St. Sanford, ME 04073 1-800-965-5762 or 324-5762

Buxton area

York County CAP P.O. Box 72, 6 Spruce St. Sanford, ME 04073 1-800-965-5762 or 324-5762

Elliot area

York County CAP P.O. Box 72, 6 Spruce St. Sanford, ME 04073

1-800-965-5762 or 439-2699

Farmington area

Community Concepts Transportation 79 Main St. Auburn, ME 04210 1-877-603-0594 (toll free)

Freeport

Freeport Taxi (Provide a Ride) 88 Bow St. Freeport, ME 04032 865-9400

Hancock County

Washington-Hancock Community Agency P.O. Box 280, 2 Maple St Milbridge, ME 04658 546-7544

Kittery area

York County CAP P.O. Box 72, 6 Spruce St. Sanford, ME 04073 1-800-965-5762 or 439-2699

Lewiston area

Western Maine Transportation 54 Pine St.
Mexico, ME 04257
784-9335 or 1-800-393-9335

Mexico area

Western Maine Transportation 76 Merrow Rd. Auburn, ME 04210 784-9335 or 1-800-393-9335

Norway area

Western Maine Transportation 76 Merrow Rd. Auburn, ME 04210 784-9335 or 1-800-393-9335

Penobscot County

Penquis CAP P.O. Box 1162, 262 Harlow St. Bangor, ME 04402 973-3695 or 1-866-853-5969

Piscataquis County

Penquis CAP P.O. Box 1162, 262 Harlow St. Bangor, ME 04402 564-7116 or 1-866-853-5969

Portland area

Regional Transportation 127 St. John St. Portland, ME 04102 774-2666, 1-800-244-0704

Rockland area

Coastal Transportation Services 46 Summer St. Rockland, ME 04841 596-6605 or 1-800-289-6605

Rumford area

Western Maine Transportation 76 Merrow Rd. Auburn, ME 04210 784-9335 or 1-800-393-9335

Community Concepts Transportation 79 Main St. Auburn, ME 04210 364-3685

Sanford area

York County CAP P.O. Box 72, 6 Spruce St. Sanford, ME 04073 324-5762

Skowhegan area

KV CAP 97 Water St. Waterville, ME 04901 474-8487

South Paris area

Community Concepts Transportation 79 Main St. Auburn, ME 04210 South Paris 743-6905

Western Maine Transportation 76 Merrow Rd. Auburn, ME 04210 784-9335 or 1-800-393-9335

Waldo County

Waldo County Transportation P.O. Box 130, 9 Field St., Suite 302 Belfast, ME 04915 338-4769, 1-800-439-7865

Washington County

Washington-Hancock Community Agency P.O. Box 280, 2 Maple St Milbridge, ME 04658 546-7544

Waterboro area

York County CAP P.O. Box 72, 6 Spruce St. Sanford, ME 04073 1-800-965-5762 or 247-3665

Waterville area

KV Community Action Program 97 Water St. Waterville, ME 04901 859-1500

Other Important Numbers

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Consumers for Affordable Health Care

PO Box 2490 Augusta, ME 04338-2490 Phone for voice or TDD/TTY 1-800-838-0388 or (207) 622-7083 consumerhealth@mainecahc.org

Disability Determination Services

Department of Health and Human Services 116 State House Station Augusta, ME 04333 377-9500 or 1-800-452-8718 TDD/TYY 377-9588

Disability Rights Center

24 Stone Street, PO Box 2007 Augusta, ME 04339-2007 Phone for voice or TTY: (207) 626-2774 1-800-452-1948

Long Term Care Ombudsman

Phone for voice or TDD/TTY 621-1079 or 1-800-499-0229

MaineCare Member Services

1-800-977-6740

If you are deaf or hard of hearing and have a TDD/TTY machine, call 1-800-977-6741

Maine Equal Justice Partners

126 Sewall Street Augusta, ME 04330 (207) 626-7058

e-mail: <u>info@meip.org</u>

Legal Services for the Elderly

For Legal Assistance call 1-800-750-5353. They will provide assistance or direct you to a local office. If you are deaf or hard of hearing and have a TTY machine, call 1-800-750-5353. Or you can visit their website: http://www.mainelse.org.

Augusta

5 Wabon Street

Augusta, ME 04330

Bangor

450 Essex Street

Bangor, ME 04401

Lewiston

8 Falcon Road

P.O. Box 659

Lewiston, ME 04243

Scarborough

136 US Rte. 1

Scarborough, ME 04074

Presque Isle

33 Davis Street P.O. Box 1288 Presque Isle, ME 04769

Pine Tree Legal Assistance

You can visit their website at: http://www.ptla.org.

Augusta

39 Green Street P.O. Box 2429 Augusta, ME 04338 623-7777 TTY 623-7777

Bangor

61 Main Street 942-8241 TTY 942-1060

Lewiston

37 Park Street, Suite 401 Lewiston, ME 04240 784-1558 TTY 828-2308

Machias

P.O. Box 278 Machias, ME 04654 255-8656 TTY 255-6179

Portland

88 Federal Street P.O. Box 547 Portland, ME 04112 774-8211 TTY 828-2308

Presque Isle

373 Main Street Presque Isle, ME 04769 764-4349 TTY 764-2453

Chapter 7: Terms and Definitions

B

Benefit Package

A package of covered services available through MaineCare.

C

Co-payment

This is the amount some MaineCare members have to pay to the provider for certain benefits at the time the service is provided.

Cost of Care

The amount some members pay toward the cost of care in a facility, like a nursing home or for a waiver program.

Covered Services

Services paid for by MaineCare, for example, doctor's visits, hospital visits, and medications.

D

DEL (Drugs for the Elderly and Disabled)

This benefit helps disabled and elderly people get prescription drugs at a reduced price. It is not MaineCare.

DirigoChoice Health Plan

A health plan for MaineCare members who work for an employer who offers it.

E

Eligibility Specialist

A staff person at DHHS (Department of Health and Human Services) who reviews applications and decides if you are eligible for MaineCare. This person may also decide if you are eligible for other Department programs like Food Stamps.

Emergency

An emergency is any physical or mental health problem that an ordinary person would think could cause serious harm if not treated quickly.

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K

Katie Beckett

The MaineCare eligibility option for children with special health needs.

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M

MaineCare

MaineCare is a name for Maine Medicaid. It is a partnership between the federal and state governments. The Maine legislature is involved in decisions about eligibility and coverage.

Maine Rx Plus

This benefit helps people get prescription drugs at a reduced price. It is not MaineCare.

Managed Care

Services and treatments provided and coordinated by a primary care provider. Sometimes called primary care case management.

Medicaid

A public health insurance program. It is jointly funded by federal and state governments and administered by the states. In Maine, it's called "MaineCare."

Medical Assessment

The process used to decide if a member meets medical eligibility for certain services.

Medicare

The health insurance program managed by the Social Security Administration for individuals age 65 and older, people who have received Social Security disability benefits for 24 months in a row, or people who have end state kidney disease (renal failure.)

Member

A person who has met financial and medical eligibility for MaineCare.

Member Services

Answers questions for people enrolled in MaineCare.

0

Optional Treatment Services

Services for members under age 21 that are not usually covered by MaineCare but can be covered if certain conditions exist.

P

PA (Prior Authorization)

A process by which services are pre-approved for payment by MaineCare. Back to Table of Contents

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(PCP) Primary Care Provider for Managed Care

A doctor, physician's assistant, nurse practitioner or a health care clinic that you choose to manage your health care.

Provider

A person or agency that provides care.

R

Referral

Approval from your primary care provider to get some managed care services from another provider or specialist.

S

Social Security Disability Income (SSDI) and Supplemental Security Income (SSI)

The Social Security Administration programs that provide cash benefits for low-income people who are disabled or age 65 and over.

Specialist

A health care provider who deals with one area of health care, such as a cardiologist (heart doctor).